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\*\* CONTINUING DATA \*\*\*\*\*  
*none, LCC*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*none, LCC*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 16	TOTAL CLAIMS 58	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>Lawrence C. Cole</i>	INITIALS <i>LCC</i>		

Verified and Acknowledged

ADDRESS  
 23909  
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TITLE  
 Toothbrush with enhanced cleaning effects

FILING FEE  RECEIVED 2432	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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